

Neuropathic Pain in Advanced Cancer

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Studies have shown neuropathic component is evident in about 1/3 of cancer pain cases and have a substantial impact on the quality of life. Due to advancement and effectivity in Cancer treatments, cancer patients are now living longer and there are more cancer survivors. However, side-effects, particularly neuropathic pain, have become more problematic. Awareness of several neuropathic pain syndromes in cancer patients and a better understanding of different issues related to assessment and treatment, may lead to better recognition and improved outcomes in neuropathic cancer pain. Despite the lack of relevant high-quality data and the difficulties in performing randomized controlled trials in cancer pain, have justified the acceptance of drugs already known to be effective in benign neuropathic pain. Treatment of neuropathic cancer pain is often challenging and may involve multimodality pharmacological approach. Opioids are used more frequently and standard guidelines for the use of anticonvulsants (e.g. pregabalin), antidepressants (e.g. duloxetine), and topical treatments (e.g. lidocaine) may be applicable. Choice is dictated not just by age, drug interactions, and comorbidities, but also by the coexistence of many symptoms in patients with cancer.